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OCT 03 2005

Complete and send this form, together with applicable fee(s), to: **Mail****Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

21921

7590

07/07/2005

**DOV ROSENFELD
5507 COLLEGE AVE
SUITE 2
OAKLAND, CA 94618**

10/05/2005 TBESHAH2 00000030 10716953

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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Amy Drury

(Depositor's name)

[Signature]

(Signature)

October 3, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10716,953	11/18/2003	Andrew Adams	CISCO-8481	6461

TITLE OF INVENTION: METHOD AND APPARATUS FOR REDUCING OSCILLATOR PULL IN A CMOS WIRELESS TRANSCEIVER INTEGRATED CIRCUIT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	10/07/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
RAO, SHRINIVAS H	2814	375-238000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Dov Rosenfeld2 Inventek

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cisco Systems Wireless Networking (Australia) Pty Limited North Sydney, AustraliaPlease check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **50-0292** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

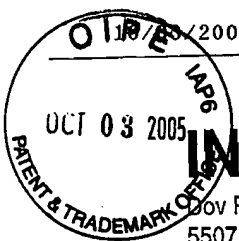
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature XDate October 3, 2005Typed or printed name Dov RosenfeldRegistration No. 38,687

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Fax

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Phone: (510) 547-3378; Fax: (510) 291-2985
dov@inventek.com

OUR REF: CISCO-8481

TO: Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

FAX No.: (571) 273-2885

DATE: October 3, 2005

FROM: Dov Rosenfeld, Reg. No., 38,687

RE: Issue Fee for Application No.: 10/716,953

Number of pages including cover: 6

OFFICIAL COMMUNICATION

ISSUE FEE PAYMENT


Included herewith are:

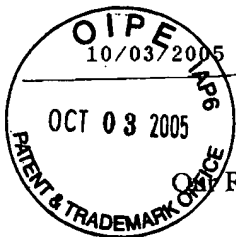
- A transmittal letter and copy
- Fee(s) Transmittal (form PTOL-85)
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Date: Oct 3, 2005

Signed: 
Name: Amy Drury



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Ref./Docket No: CISCO-8481

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Adams, *et al.*

Application No.: 10/716,953

Filed: November 18, 2003

Title: METHOD AND APPARATUS FOR
REDUCING OSCILLATOR PULL IN A
CMOS WIRELESS TRANSCEIVER
INTEGRATED CIRCUIT

Group Art Unit: 2814

Examiner: SHRINIVAS RAO

Notice of Allowance Mailed:
July, 7, 2005

Confirmation No: 6461

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Dear Commissioner:

Transmitted herewith is a completed "Issue Fee Transmittal" Form. Included with the form are:

- ☒ A credit card payment form for the issue fee and any advance order of copies;
☐ drawing corrections (with separate letter);
☐ formal drawings (with separate letter);

- ☒ The Commissioner is hereby authorized to charge payment of the any missing fee or credit any overpayment to Deposit Account No. 50-0292
(A DUPLICATE OF THIS TRANSMITTAL IS ATTACHED):

Respectfully Submitted,

Date

Oct. 3, 2005

Dov Rosenfeld, Reg. No. 38687

Address for correspondence:

Dov Rosenfeld
5507 College Avenue, Suite 2,
Oakland, CA 94618
Tel. 510-547-3378; Fax: 510-291-2985

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Date:

Oct 3, 2005

Signed:

Name: Amy Drury